

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: PREHEATER PLUG COMPRISING A
PRESSURE SENSOR AND ENGINE
FITTED THEREWITH
Attorney Docket Number:: 0598-1008
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MICHEL
Middle Name::
Family Name:: BOUCARD
Name Suffix::
City of Residence:: TOURNEFEUILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 20, RUE DES BICHES
Address::
City of Mailing Address:: TOURNEFEUILLE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-31170

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: BERND
Middle Name::
Family Name:: LAST
Name Suffix::
City of Residence:: TOURNEFEUILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 54, RUE DE BELBEZE
Address::
City of Mailing Address:: TOURNEFEUILLE

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-31170

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: CYRILLE
Middle Name::
Family Name:: PATRI
Name Suffix::
City of Residence:: TOULOUSE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 9, RUE FOURE LABROT
City of Mailing Address:: TOULOUSE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-31100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ALAIN
Middle Name::
Family Name:: RAMOND
Name Suffix::
City of Residence:: MERVILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 187, CHEMIN DE LA TUILERIE

Address::

City of Mailing Address:: MERVILLE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-31330

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED KINGDOM

Status:: Full Capacity

Given Name:: JOHN

Middle Name::

Family Name:: BURROWS

Name Suffix::

City of Residence:: CHESHIRE

State or Province of

Residence::

Country of Residence:: UNITED KINGDOM

Street of Mailing 22 YEW TREE DRIVE, NORTHWICH

Address::

City of Mailing Address:: CHESHIRE

State or Province of Mailing Address::

Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing Address:: CW8 4NR

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: SANDRO

Middle Name::

Family Name:: GORETTI

Name Suffix::

City of Residence:: RUBIERA

State or Province of

Residence::

Country of Residence:: ITALY
 Street of Mailing 6/A VIA DELLE VALLI
 Address::
 City of Mailing Address:: RUBIERA
 State or Province of Mailing Address::
 Country of Mailing Address:: ITALY
 Postal or Zip Code of Mailing Address:: I-42048

Correspondence Information

Correspondence Customer 00466
 Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002783	10/28/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0312682	10/29/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::